GP 373/

PAINWHE UNITED STATES PATENT AND TRADEMARK OFFICE

In re App	lication	PATENT APPLICATION			
Inventor:	Barry N. Gardiner Paul T. McDonald Richard D. Phipps	Examiner: T. Pham Art Unit: 3731			
SC/Serial	No.: 08/781,579)			
Filed:	January 9, 1997)			
IN M	UTURED STAPLE SURGICAL FASTENERS, ISTRUMENTS AND METHODS FOR INIMALLY INVASIVE VASCULAR ND ENDOSCOPIC SURGERY				
	I hereby certify that this correspondence is being dep Postal Service with sufficient postage as first class mail in an envelor Commissioner for Patents, Washington, D.C. 20231, on August Dona C. Edwards Dona C. Edwards Dona C. Edwards, Reg. No. 42,507 Signature Date: August 20, 1998	opé addressed to Assistant (st 20, 1998.			
	<u>RESPONSE TRANSMITTAL LE</u>	ETTER			
Washingto	Commissioner for Patents on, D.C. 20231	•			
Sir:					
Tra are the fol	ansmitted with this communication in connection will lowing:	th the above-identified application			
<u>✓</u> A]	Response B under 37 C.F.R. § 1.111 to the Office	Action dated <u>July 20, 1998</u> .			
A	Response under 37 C.F.R. § 1.116 to the Office Ac	ction dated			
A]	Petition for an Extension of Time under 37 C F R	81 136			

	A Verified Statement pursuant to 37 C.F.R. §1.27 to establish small entity status under 37 C.F.R. §1.9(f).									
	An Information Disclosure Statement pursuant to 37 C.F.R. §1.56.									
	The fee associated with this communication has been calculated as shown below:									
✓	No fee is required with this communication.									
	Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established.									
_	A fee for extension of time for response under 37 C.F.R. §1.136 filed within month(s) after the original time for response of \$0 is due.									
	A fee of \$0 Statement.	is due for	r the sub	mission of the a	accompanying Info	ormat	ion Disclosure			
	A fee for ac	Idition of claim	s under	37 C.F.R. § 1.1	7 is due as follow	s:				
Claims Remain After Amend	ning	Highest Previously Paid For		Number Extra	Rate Small Entity, Other Than Small Entity	<i>'</i>				
Total Claims	35 -	_66	=	<u>0</u> * X	\$11.00 \$22.00	=	\$0			
Indepe Claims	endent	_18	=	<u>0</u> * X	\$41.00 \$82.00	=	\$0			
	resentation of the Dependen	of t Claim(s)			\$135.00 \$270.00	=	\$0			
*If the	difference is	less than zero,	enter "(O".						
					Additional Fee	=	\$ <u>0</u>			
	The total fe	e required with	this cor	nmunication is	\$ <u>0</u> and is to b	e paid	d as follows:			
_	Please charg	ge Deposit Acco orization is encl	unt No. losed.	06-1325 in the a	amount of \$	A (duplicate copy			
	A check in	the amount of \$	5 <u>0</u> j	is enclosed.						

- ✓ The Commissioner is hereby authorized to charge underpayment of any fees, including the following fees, associated with this communication or credit any overpayment to Deposit Account No. 06-1325. A duplicate copy of this authorization is enclosed.
 - ✓ Any filing fees under 37 C.F.R. §1.16 for the presentation of additional claims.
 - Any patent application processing fees under 37 C.F.R. §1.17 including any applicable fee for extension of time.

Respectfully submitted,

Date: August 20 , 1998

Dona C. Edwards Reg. No. 42,507

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